

MINNESOTA Board of Dentistry • Updates

Vol. 26 2012 [November 2012]

NEW REGULATIONS TAKE EFFECT

From the Board

President 2

Welcome New Board
Members 3

The Complaint Process.. 4

New Rules and
Notification of Newly
Proposed Rules 5

Disciplinary Actions 6

Corrective Actions.... 7-10

Upcoming Board and
Committee Meetings.... 11

A number of new regulations have been established by the Minnesota Legislature that may impact your license or your practice of dentistry. As with all statutes and rules, licensees are responsible for staying informed of changes and for complying with those changes.

The following is a summary of some of the significant regulatory changes related to the Board of Dentistry.

- **DENTAL LABORATORY REGISTRATION ESTABLISHED** (see [Dental Lab Bill](#)):

Requires dentists in Minnesota to *only* use dental labs that are registered with the Board of Dentistry, unless the lab is located outside of Minnesota. Regardless of whether the lab is registered with the Board, a lab must provide a comprehensive material content notice and place of origin report for inclusion in the patient record. *Effective: January 1, 2013.*

- **GUEST LICENSURE PROVISIONS EXPANDED** (see [Board Bill, Section 2](#)): Permits dental professionals licensed in other jurisdictions to apply for short-term Guest Licenses to participate pro bono in recognized volunteer dental events. *Effective: July 1, 2012.*

- **MINI LICENSES PERMITTED** (see [Board Bill, Section 5](#)): All licensed dental professionals are required to publicly display their Board-issued licenses and current renewal certificates at each location where they practice. The new legislation allows a dental professional to display a wallet-sized license format issued by the Board at locations that are **NOT** the licensee's primary practice site. This provision is intended to make it easier to comply with regulations when participating in volunteer activities. Licensees interested in this type of duplicate license may contact the Board directly (it is not available online at this time). *Effective: August 1, 2012.*

- **E-MAIL ADDRESSES REQUIRED** (see [Board Bill, Section 6](#)): Requires *all* licensed dental professionals to provide and maintain a current e-mail address with the Board of Dentistry. In order to comply, licensees may utilize the Change of Address feature on the Board's website ([BoD Address Change](#)), or submit the e-mail address directly to the Board by mail, e-mail (dental.board@state.mn.us) or fax. *Effective: January 1, 2013.*

- **SUNSET REVIEW PROVISIONS** (see [Sunset Bill 2012](#)): The Board of Dentistry and the other health regulatory boards participated in a legislative sunset review during 2011-2012. The Board's report to the Commission may be viewed at [BoD Sunset Report](#). Among the provisions of the Commission's bill were:

- **Next review.** The boards are scheduled for Sunset review again in 2018.
- **Reserves.** The Board will now be permitted to accumulate up to one year's funding in reserve without threat of having the reserve funds swept by the legislature for purposes not related to Board operations.
- **Fees.** Requires that state surcharges be identified and itemized separately from fees for licensure and license renewal.
- **Guidance.** Will permit boards to offer "guidance" to licensees about the application of laws.
- **Reports.** The boards are required to report back to the legislature, often with draft statutory language, on a number of issues...
 - Requirements for individuals, health care organizations, insurers, associations, courts, and other institutions to report
 - Report adverse actions against licensed health care professionals, and establishment of penalties for failure to report
 - Requirement for boards to post information on websites about felonies or gross misdemeanor convictions, malpractice judgments, and corrective or disciplinary action in other jurisdictions regarding licensees
 - Establishment of uniform criminal background check processes

See page 6 of this newsletter for information on new rules that became effective in January 2012. The Board is also engaged in two *new* groups of **rulemaking**, establishing new rules in some cases, and changing others. The rulemaking process is extremely structured, and involves significant public input. Information about proposed rules always appears on the Board's home page. ([Dentistry Rulemaking Docket](#)). As the Board of Dentistry develops protocols or reports for each of these areas, and as rules progress through the system, they will appear on the Board's website.



FROM THE BOARD PRESIDENT

I always assume that the information from the CEO or President of an organization should be inspiring and visionary, which is why I usually try to avoid those positions. Those of you, who know me well, know that I am not very inspiring. I am more of a worker ant.

A primary job of the President is to be the spokesperson for the Board of Dentistry along with the Executive Director. I set the committee chair positions and chair the full Board meetings. We currently have a very competent group of Board members without a huge ego among them. We work well together. We take our job seriously and put in a phenomenal amount of time. This job is not for the faint of heart and it certainly is not for those who do not want to pull their share of the load. We are appointed by the Governor and serve at his pleasure.

A primary job of the Executive Director is to manage the staff and see to the timely and efficient processing of the various tasks that come before the Board. There is no constant to this job and while certain tasks are repetitive, they are constantly evolving. Watching the staff is like watching dancing with the stars without the fancy costumes. Each week the footwork is different. They are a quiet, thoughtful and dedicated group of workers.

Our primary job united as an organization is "Public Protection." I am sure some of you think our job is to make your lives miserable. That reflects an unfortunate lack of understanding of the purpose behind regulations governing the practice of dentistry. Having practiced for almost thirty years, I did my best to understand the statutes and rules that regulate our industry and to not violate any of them. As a practitioner, you can do EVERYTHING totally correctly and a patient can still write up a complaint against you. We MUST evaluate every complaint and we do, ONE CASE AT A TIME. We do it as timely and efficiently as we can although to some of you who contact us we move forward at a snail's pace. I would love to take this time to share with you some of the most significant issues before us. I cannot. Much of what we do is confidential and the rest is done at open and public meetings. You are invited to join us. Bring snacks; we work for food. A very small percentage of individuals provide us with the majority of our work.

On occasion, an issue that you are involved with may come to the attention of the Board, and you would be asked to explain what occurred. In your minds, you believe you have been handed the single and only solution to a given problem from some source, and you are bound and determined to shape the rest of the world to your

vision. Our job is usually to try and show you a different perspective, and suggest what may be necessary so you can continue to serve the public. Most of you do quite well. Most of you! Some do not. As I said, much of what we do is confidential.



I am finishing my fourth year on the Board. I have had some wonderful mentors in the form of Drs. Candy Mensing, Joan Sheppard and Dave Linde. I have learned this job by doing it and listening to those who have held the position prior to me. I have had a chance to work with some of the finest leaders in our organization from the University of Minnesota, Metropolitan State University, Normandale Community College, Minnesota Dental Association and multiple organizations around the country. The State of Minnesota has spent a fair amount of

money educating me in the area of regulation and I would like to think that I have given them good value for the dollar spent.

In my private life I belong to an organization called the LIONS. Our motto is "We Serve." Being on the Board of Dentistry fits with this philosophy. To be on the Board of Dentistry is to serve. We serve the public.



Dr Neal Benjamin receiving the president's gavel from Dr David Linde

Another very important thing to remember about being on the Board is that it is temporary. One of my favorite songs when I was growing up was a song titled the Whiffenpoof Song. In the song, the lyrics talk about a group of singers who sing but eventually will be replaced, and those who are replaced will "pass and be forgotten with the rest." This is the Board. We come to do a job and then step out of the way and let the next group hopefully build upon what we have accomplished. We are appointed, we learn, we work, we mentor and then we leave.

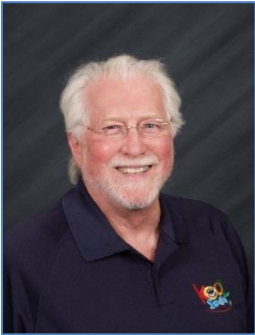
This applies to every organization we have. If you think you can handle it, I suggest you apply. Maybe it is at your church, a school, your community organization, the Scouts,

the Lions, the Rotary or the Board of Dentistry. The world needs all the leadership it can get. Do it. Mentor the next group and then get out of the way and be forgotten with the rest.

It has been an honor to have served you,

President, Minnesota Board of Dentistry
Master, Academy of General Dentistry
Fellow, American College of Dentists

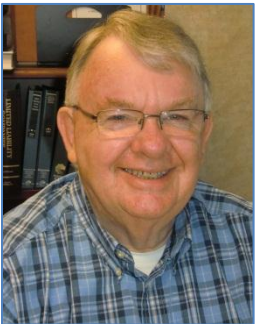
WELCOME NEW BOARD MEMBERS



Paul O Walker, DDS received his Doctor of Dental Surgery degree from Northwestern University and his specialty training in pediatric dentistry and Master of Science degree from Indiana University. He received the Ralph E. McDonald Scholar Award in 1972. Following completion of his specialty training, he served as the Program Director of the Advanced Specialty Education Program in Pediatric Dentistry and the Director of the Hospital Dental Clinic at the University of Minnesota. In addition, he served as the Associate Dean for Clinical Services and Professor of Pediatric Dentistry at Baylor College of Dentistry/Texas A&M University System and currently is a Clinical Professor with Indiana University/Riley Children's Hospital.

He is a member and fellow of the American Academy of Pediatric Dentistry and served as a member of the Board of Trustees. He also served as Director/Examiner and President of the American Board of Pediatric Dentistry and was a two-term member of the Pediatric Dentistry Review Committee for the Commission on Dental Accreditation. He is a fellow of both the American College of Dentistry and the International College of Dentistry. In 2004, he received the Distinguished Alumni Award from the Indiana University Pediatric Dentistry Alumni Association. He has been an invited speaker for continuing education programs both nationally and internationally and served as a scientific article reviewer for Practical Reviews in Pediatric Dentistry, the Pediatric Dentistry Editorial Review Board and the Scientific Review Committee for the American Academy of Pediatric Dentistry Foundation.

Although retired in 2000, he was appointed by the governor to the Minnesota Board of Dentistry in 2011, and serves on the Minnesota and Virginia Medicaid Dental Services Advisory Committees. He provides consultant services through Pediatric Dentistry Consultant, LLC. Additionally, he is the Vice President for Clinical Quality and Development and a member of the Board of Directors for Kool Smiles.



John M (Jake) Manahan, JD was appointed to the Board as a public member by Governor Dayton on March 29, 2011. Mr. Manahan is an attorney in Bloomington, MN, practicing primarily in the areas of business and contract law. He has been a member of the Minnesota Bar for over 38 years. Mr. Manahan served as Minnesota State Deputy Treasurer from 1987 to 2003, and served as Chair of the Minnesota Information Policy Council for ten years. He represented the State Treasurer on all subcommittees of the Minnesota State Board of Investment for 16 years. He also represented Minnesota on the federal-state task force that implemented electronic benefits transfer (EBT) payments for food stamp recipients.

Manahan served four years as a public member of the National League for Nursing Accreditation Commission for Associate Degree nursing programs. Mr. Manahan is past president of the 8th District Bar Association, of the Shakopee Chamber of Commerce and of the Shakopee Lions Club. He has a Bachelor of Arts degree from St. Mary's University and a *Juris Doctor* degree from the University of Minnesota. Mr. Manahan is appointed as a public member to a four-year term

that ends January 3, 2015.



David S Gesko, DDS is the Dental Director and Senior Vice President for HealthPartners. In addition to his administrative responsibilities, he is a practicing dentist in the HealthPartners Clinic system.

Dr. Gesko grew up in Anoka and attended Montana State University in Bozeman, Montana prior to his dental education at the University Of Minnesota School Of Dentistry. After receiving his DDS degree, he completed a residency in General Practice at the Veterans Association Medical Center in Portland, Oregon. Following that, he operated a private dental practice in Bozeman, Montana.

Prior to joining HealthPartners, Dr. Gesko was the Associate Dental Director for Kaiser Permanente/Permanente Dental Associates (PDA) in Portland, Oregon for 20 years. In the northwest, PDA (a private, dentist-owned group practice) consisted of 120 dentists and operated 17 dental offices.

Dr. Gesko is passionate about integrating medical and dental care and applying growing evidence-based research to care delivery.

Dr. Gesko serves on several national panels looking at oral health quality measurement, including the National Quality Forum (NQF) Expert Panel on Oral Health and the National Leadership Committee on Oral Health sponsored by the DentaQuest Institute. Both of these groups are working to build national consensus on guidelines for prevention and disease management in oral health care and to facilitate implementation of those guidelines into the care, policy, and financing systems.

Dr. Gesko was appointed for a four year term by Governor Mark Dayton in 2012 as a Board member for the Minnesota Board of Dentistry.

THE COMPLAINT PROCESS

THE BOARD HAS REQUESTED A MEETING WITH YOU...

The complaint resolution processes of the Minnesota Board of Dentistry, and all of the Minnesota Health Licensing Boards, are governed by [Minnesota Statute 214](#).

FIRST STEPS

Letter of Inquiry

When the Board receives a complaint, it creates an obligation upon the Board to investigate the concerns that have been raised. In most cases, the Board's Complaint Unit staff will send the licensee a notification of the complaint allegations, and request a response to that *Letter of Inquiry*. When appropriate, the licensee is asked to also submit copies of patient records related to the complaint.

Complaint Committee Review

One of the Board's two Complaint Committees is assigned the responsibility to review the complaint and response. In many cases, the Committee is able to clarify the issues of concern through this simple review process. When things do not appear so simple, or the concerns appear to have greater significance, the dental professional may be asked to meet with the Committee to resolve any outstanding issues.

WHAT TO EXPECT

Request for a Conference

A meeting or conference with one of the Complaint Committees is either an *informational* conference or a *disciplinary* conference. For an informational conference, the notification letter sent to the dental professional is entitled "Informational Conference." For a disciplinary conference, the notification letter sent to the dental professional from the Committee is entitled "Notice of Conference with Board Complaint Committee." The notification letter will specify the date and time of the conference and outline the alleged violations to be discussed at the conference.

Meeting with Complaint Committee

A meeting with a Minnesota Board of Dentistry Complaint Committee is held for the purposes of investigation, negotiation, education, or conciliation.

Moreover, the notification letter includes general information about the complaint resolution process and informs the dental professional about their right to be represented by legal counsel at the conference. At almost all conferences, the Committee will have its attorney present from the Office of the Attorney General. By statutory requirement, the Attorney General's Office represents state agencies in performance of their regulatory functions.

Conferences are held at the Board office located in Minneapolis, and typically have the following individuals present: the three members of the Complaint Committee; the Assistant Attorney General representing the Committee; the Board's Executive Director; and two Complaint Unit staff members. During the conference, the Complaint Committee members primarily address questions to the dental professional as they seek to clarify matters.

RESOLUTION

Deliberation

After the Complaint Committee has reviewed all of the allegations with the dental professional, a recess will be called by the Committee. The dental professional (and their attorney when represented) will leave the conference room to wait in the Board's reception or other designated area while the Committee deliberates.

Recommended resolution of a complaint may take any number of forms. A complaint may be resolved by closing the complaint. Alternatively, if the Committee recommends that the Board take action, a wide range of actions will be considered, which may include: remediation through coursework, research and reporting, community service, civil penalties (fines), mandated recordkeeping or infection control inspections, limitations on practice, suspension of license, revocation of license, or any number of remedies that are determined to be appropriate for the particular case.

After deliberation, the dental professional is called back into the conference room and the Committee's recommendation for resolving the matters is verbally presented to them.

BIG PICTURE

The number of licensees who find themselves invited to meet with a Complaint Committee is relatively small. Should you find that you are asked to respond to a complaint, the best approach is to *have* been prepared, and to ensure that your documentation is always comprehensive. The review process is straightforward, and relies on recordkeeping, consideration of the standard of care/practice, and the cooperation of the dental professionals involved.



NEW RULES EFFECTIVE JANUARY 4, 2012...

A number of rule changes have been approved, adopted, and became enforceable on January 4, 2012. Minnesota regulated dental professionals are responsible for knowing and complying with the complete language of the new rules.

In summary, the January 2012 rule changes focused on incorporating the *dental therapist* and *advanced dental therapist* into the existing rules for such things as licensure requirements, reinstatement requirements, examination conduct, nitrous oxide administration, disciplinary action, professional development requirements, and recordkeeping. The rules also addressed definitions for the *limited-license permit* dental assistants.

NOTIFICATION OF NEWLY PROPOSED RULES



OFFICIAL NOTICE RE: Proposed Amendments to Permanent Rules Relating to Limited General Dentists, Dentists, Dental Therapists, Dental Hygienists, and Licensed Dental Assistants, *Minnesota Rules*, Parts 3100.1130, 3100.1700, 3100.1750, 3100.1850, 3100.3600, 3100.5100, 3100.5300, 3100.7000, 3100.8400, 3100.8500, and 3100.9600

The Board is considering some amendments to its existing rules. The amendments that are under consideration in the Board's proposed rules focus on the following areas—

- **Limited General Licenses:** requirements and terms of licensure for a limited general dentist are introduced into rule;
- **CPR Requirements:** the term “consecutive” added to clarify the CPR requirement for licensure (a licensee must maintain current, continual, consecutive certification in the appropriate level of CPR);
- **Reinstatement:** addition of an interview option with the Board when reinstating;
- **Professional Development:** expand professional development elective activities and add a professional development portfolio audit fee;
- **Specialty Dentistry:** add Oral and Maxillofacial Radiology as another recognized specialty area;
- **Fluoride Varnish:** allow assistants to apply fluoride varnish;
- **Delegated Duties:** allow dental hygienists and licensed dental assistants to complete preliminary charting, take photographs, and take vital signs; and
- **Recordkeeping:** require that dental therapists properly identify the collaborating dentist in patient records; and require that radiographs being transferred are adequate and of diagnostic quality.

Please check the Board's website at www.dentalboard.state.mn.us for the entire text and to review the Statement of Need and Reasonableness (SONAR) for these proposed rules.

DISCIPLINARY ACTIONS: JUNE 2011 – OCTOBER 2012

Licensee's Name <small>[Click on Name for Link to Document]</small>	License#	City	Action Type	Date of Order
Bale, Jennifer (DH)	H7746	Rochester	Unconditional License	06/22/12
Bigler, Billy (LDA)	A13101	Brainerd	Stayed Suspension and Conditional License	06/17/11
Bigler, Billy (LDA)	A13101	Brainerd	Unconditional License	06/22/12
Burrichter, David (DDS)	D12766	Rochester	Conditional License	12/02/11
Bussa, Michael (DDS)	D9268	Duluth	Stipulation & Consent Order	06/17/11
Bussa, Michael (DDS)	D9268	Duluth	Unconditional License	06/22/12
Dunphy, David R (DDS)	D9166	Shoreview	Conditional License	06/22/12
El Deeb, Mohamed (BDS)	D9508	Coon Rapids & St. Cloud	1) Order: Temporary Suspension 2) Order: Continuing Temporary Suspension	1) 09/07/12 2) 09/17/12
Enstad, Robin (LDA)	A9145	Canby	Conditional License	09/21/12
Fiedler, Joseph A (DDS)	D7540	Chanhassen	Conditional License	03/23/12
Flicek, Julie [Kovarik] (LDA)	A4321	Jordan	Conditional License	09/21/12
Grandaw, Linda (LDA)	A4140	Bloomington	Conditional License	09/21/12
Hagen, Susan M [Lobin] (LDA)	A7490	Blaine	Stipulation & Consent Order	03/23/12
Hammam, Mohamed (BDS)	D12186	St. Cloud	Voluntary Surrender	06/22/12
Harris, Mark (DDS, MSD)	D8006	Maplewood	Voluntary Surrender	02/27/12
Hawthorne, Dionne (LDA)	A4760	Maple Grove	Conditional License	03/23/12
Johnson, Nancie J (DDS)	D9836	Deephaven	Unconditional License	12/02/11
Koty, Kelli Anne (LDA)	A11871	Apple Valley	1) Stipulation & Consent Order 2) Unconditional License	1) 03/23/12 2) 09/21/12
Kotz, Connie Marie (LDA)	A3826	Clearwater	Voluntary Surrender	06/22/12
Lobeck, James C (DDS)	D8594	Hutchinson	Voluntary Surrender	09/23/11
Lohse, Dawn M (LDA)	A9400	Ham Lake	Unconditional License	06/22/12
Mattingly, Michael A (DDS)	D9998	Minneapolis	Findings of Fact, Conclusion, Final Order (Suspension)	02/28/12
McGrath, Regina M (DDS)	D10453	Eden Prairie	Voluntary Surrender	03/23/12
Medalen, Jill Anne (LDA)	A12011	Coon Rapids	Voluntary Surrender	12/02/11
Ostrowsky, Keith F (DDS)	D10143	South St. Paul	Stayed Suspension, Limited, Conditional License	09/23/11
Otte, Christine (LDA)	A11084	Coon Rapids	Conditional License	09/21/12
Ringle, Otto F Jr (DDS)	D6360	Walker	Stayed Suspension, Limited, Conditional License	03/23/12
Risha, Ayman (BDS)	Applicant	St. Cloud	Findings of Fact, Conclusions, Final Order (Deny Licensure)	03/26/12
Rolfe, William P, Jr (DDS)	D8343	Hopkins	Conditional License	09/21/12
Sims, Charles W (DDS)	D9005	Minneapolis	Findings of Fact, Conclusion, Order of Denial of Petition	12/02/11
Swain, Gene W Jr (DDS)	D10406	Waseca	Voluntary Surrender	03/23/12
Swenson-Bellson, Thomas (DDS)	D10339	Andover	Unconditional License	06/22/12
Vander Eyk, Lindy A (DH)	H7519	St. Cloud	Stipulation & Consent Order	06/17/11
Vander Eyk, Lindy A (DH)	H7519	St. Cloud	Unconditional license	06/22/12
Vos, Leslie (LDA)	A13812	Inver Grove Hgts	Stipulation & Consent Order	09/23/11
Vukodinovich, Thomas (DDS)	D9526	St. Paul	Limited & Conditional License	09/21/12

CORRECTIVE ACTIONS: 06/03/2011 – 08/16/2012

<i>Profession</i>	<i>Violation(s)</i>	<i>Remedies</i>
Dentist 08/05/2011	<p><u>Substandard Prosthodontics/Diagnostic/Restorative Care</u></p> <ul style="list-style-type: none"> Failed to provide documented diagnosis and treatment plans indicating rationale for placing restorations, build-ups, and crowns Failed to address radiolucent areas of decay Placed permanent crowns with short margins <p><u>Substandard Periodontal/Endodontic</u></p> <ul style="list-style-type: none"> Failed to thoroughly assess and document status of periodontal conditions (probing depth, plaque, calculus, recession, attachment level, bone height/loss, furcation, mobility, sulcular bleeding) Unable to determine proper periodontal classification Failed to perform and document pulp testings and diagnoses, take appropriate diagnostic pre- and post-operative radiographs, establish adequate treatment plans, obtain informed consent, record medications used and materials placed, and use of rubber dam Failed to properly obturate canals for multiple patients, including a perforation of the floor of the tooth chamber <p><u>Radiographic Diagnosis</u></p> <ul style="list-style-type: none"> Failed to take sufficient number of and diagnostic quality radiographs <p><u>Unprofessional Conduct/ Improper Billing re: Sedation</u></p> <ul style="list-style-type: none"> Billed for the administration of conscious (moderate) sedation when actually provided minimal sedation Billed improperly for comprehensive oral evaluations v. limited oral evaluations; billed for radiographs included with a covered dental procedure; billed for different services than actually rendered; and billed on dates other than actual date of service <p><u>Recordkeeping</u></p> <ul style="list-style-type: none"> Failed to properly and consistently document initial dental and medical histories, existing oral health status, diagnoses, treatment plans, informed consent, and medications used 	<p><u>Practice Monitoring</u></p> <ul style="list-style-type: none"> One-on-One Consultative Services x 1 year for: <ul style="list-style-type: none"> Prosthodontics, Diagnostic, and Restorative Care Periodontal Care, and Endodontic Care <p><u>Coursework</u></p> <ul style="list-style-type: none"> Dental Coding and Billing Periodontics Radiology Treatment Planning/Recordkeeping <p><u>Written Reports of Coursework to the Board</u></p> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and consultation and how it will be incorporated into the practice <p><u>Additional Written Reports to the Board</u></p> <ul style="list-style-type: none"> Protocols for Diagnostic/Prosthodontics/Restorative Care Sedation: comparison of minimal and moderate sedation <p><u>Office Inspection</u></p> <ul style="list-style-type: none"> Recordkeeping Inspection— Unannounced office visit and review of recordkeeping
Dentist 08/19/2011	<p><u>Substandard Care and Recordkeeping</u></p> <ul style="list-style-type: none"> Failed to accurately diagnose and document patient's periodontal status (erroneous probing measurements, presence of radiographic calculus, bone loss, recession, and suspected furcation involvement) Inability to distinguish between patient's need for prophylaxis with scaling and a full mouth scaling & root planing Insufficient radiographs to adequately diagnose patient's dental health Failed to provide appropriate treatment due to incomplete oral examination, lack of a comprehensive restorative treatment plan, and informed consent Failed to properly and consistently document patient's medical history, existing oral health status, medications & materials placed during treatment and indication of dental provider's name or initials 	<p><u>Coursework</u></p> <ul style="list-style-type: none"> Professional Boundaries one-on-one Periodontics hands-on training Treatment Planning/Recordkeeping <p><u>Written Reports of Coursework to the Board</u></p> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and how it will be incorporated into the practice <p><u>Jurisprudence Examination</u></p>
Dentist 09/19/2011	<p><u>Substandard Care</u></p> <ul style="list-style-type: none"> Failed to adequately evaluate and document complexity of patient's restorative care relative to: <ul style="list-style-type: none"> Comprehensive/Accurate Diagnosis Rampant adolescent caries Physiology Insufficient radiographs <p><u>Improper Use of Allied Dental Personnel</u></p> <ul style="list-style-type: none"> Delegated restorative functions to LDA inappropriately 	<p><u>Coursework</u></p> <ul style="list-style-type: none"> Practice Management & Professional Boundaries Restorative Procedures <p><u>Written Reports of Coursework to the Board</u></p> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <p><u>Additional Reports</u></p> <ul style="list-style-type: none"> Caries Risk Management Restorative Functions Allied Staff
Dentist 10/05/2011	<p><u>Substandard Diagnosis and Treatment Planning</u></p> <ul style="list-style-type: none"> Failed to provide appropriate diagnoses and formulate appropriate treatment plans Failed to take any radiographs and provide a documented diagnosis and treatment plan Failed to adequately document and complete the pulpotomies on teeth and take sufficient radiographs for this procedure <p><u>Substandard Radiographic Diagnosis</u></p> <ul style="list-style-type: none"> Failed to take a sufficient number of radiographs and properly maintain all radiographs taken in the patient record <p><u>Substandard Recordkeeping</u></p> <ul style="list-style-type: none"> Failed to make and maintain adequate patient records 	<p><u>Coursework</u></p> <ul style="list-style-type: none"> Pediatric Course: "Mini-residency in Pediatric Dentistry" Treatment Planning/Recordkeeping course <p><u>Written Report of Coursework to the Board</u></p> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice

Dentist 10/06/2011	<u>Substandard Periodontal/Prosthodontics/Diagnostic Care</u> <ul style="list-style-type: none"> Failed to properly diagnose periodontal bone loss, decay, and poor margins Placed crowns with open margins and poorly placed cantilever bridges Failed to thoroughly assess all periodontal conditions and provide a periodontal diagnosis and treatment plan Failed to administer local anesthesia for pain control when performing scaling/root planing <u>Substandard Endodontic Care</u> <ul style="list-style-type: none"> Failed to obtain, perform, and document chief complaints, adequate pulp testing and diagnoses, sufficient radiographs, treatment plans, informed consent, medications used and materials placed, and use of rubber dam Failed to obturate the canals of multiple teeth <u>Improper Prescribing</u> <ul style="list-style-type: none"> Prescribed medications without documenting diagnoses and pertinent prescription information in patient records Failed to maintain appropriate records when dispensing a medication <u>Improper Billing</u> <ul style="list-style-type: none"> Billed for different services and dates than actually rendered 	<u>Coursework</u> <ul style="list-style-type: none"> Fixed prosthodontics one-on-one course Endodontic hands on course Treatment planning/recordkeeping course <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from each course and how it will be incorporated into the practice <u>Office Inspection</u> <ul style="list-style-type: none"> Recordkeeping Inspection - Unannounced office visit and review of recordkeeping
Dentist 10/07/2011	<u>Substandard Infection Control/Sanitary Conditions</u> <ul style="list-style-type: none"> Failed to ensure that all instruments were properly bagged and sterilized Failed to ensure that operatory chairs and Panorex machine were properly disinfected between patients Failed to provide initial and annual infection control training Retained expired medication(s) <u>Improper Use of Allied Dental Personnel</u> <ul style="list-style-type: none"> Allowed dental assistants to perform subgingival scaling Allowed unlicensed dental assistants to take radiographs 	<u>Coursework</u> <ul style="list-style-type: none"> Individual Full Day Infection Control Training Infection Control– training for entire staff <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Office Inspection</u> <ul style="list-style-type: none"> Infection Control Inspection - Unannounced office visit and review of safety and sanitary conditions <u>Jurisprudence Examination</u>
Dentist 10/13/2011	<u>Substandard Diagnostic Care</u> <ul style="list-style-type: none"> Failed to provide documented diagnosis and informed consent regarding interproximal decay, apical pathology, extractions, and endodontic treatment <u>Improper Billing</u> <ul style="list-style-type: none"> Billed for different services than actually rendered <u>Unprofessional Conduct</u> <ul style="list-style-type: none"> Refused to refund insurance payments for failed treatment 	<u>Coursework</u> <ul style="list-style-type: none"> Radiology Treatment Planning/Recordkeeping Dental Coding and Billing <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and how it will be incorporated into the practice <u>Office Inspection</u> <ul style="list-style-type: none"> Recordkeeping Inspection - Unannounced office visit and review of recordkeeping
Dentist 11/14/2011	<u>Practice with Expired License x 2 Weeks</u> <ul style="list-style-type: none"> ...following failed Professional Development Portfolio audit 	<ul style="list-style-type: none"> Written Report <u>Community Service</u> <ul style="list-style-type: none"> Complete 20 hours of unpaid community service <u>Jurisprudence Examination</u>
Dentist 11/23/2011	<u>Practice with Expired License x 6 Weeks</u> <ul style="list-style-type: none"> ...following failure to renew 	<ul style="list-style-type: none"> Written Report <u>Community Service</u> <ul style="list-style-type: none"> Complete 20 hours of unpaid community service <u>Jurisprudence Examination</u>
Dentist 11/30/2011	<u>Substandard Diagnosis</u> <ul style="list-style-type: none"> Failed to diagnose widened periodontal ligament, apical pathology, apical radiolucencies, decay beneath crown Insufficient number and type of radiographs of diagnostic quality for proper assessment 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice
Dentist 12/13/2011	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Patient Records Review – Treatment and Recordkeeping</u> <ul style="list-style-type: none"> Submit 5 records for review by the Committee

Dentist 12/16/2011	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Jurisprudence Examination</u>
Dentist 12/22/2011	<u>Allied Dental Staff Misuse</u> <ul style="list-style-type: none"> Allowed unlicensed dental assistant to place orthodontic separators, fabricate temporary restorations, and take radiographs... all beyond the scope of an unlicensed assistant 	<ul style="list-style-type: none"> Credentials Report <u>Community Service</u> <ul style="list-style-type: none"> Complete 20 hours of unpaid community service <u>Jurisprudence Examination</u>
Dentist 01/19/2012	<u>Allied Dental Staff Misuse</u> <ul style="list-style-type: none"> Allowed unlicensed dental hygienist whose license had been terminated to practice dental hygiene 	<ul style="list-style-type: none"> Written Report on Maintaining and Displaying Credentials <u>Community Service</u> <ul style="list-style-type: none"> Complete 25 hours of unpaid community service <u>Jurisprudence Examination</u>
Dentist 01/31/2012	<u>Substandard Prosthodontics/Diagnostic Care</u> <ul style="list-style-type: none"> Placed inadequate permanent crowns (overhanging, short, or open margins) and inadequate coronal reduction Failed to provide a documented diagnosis and treatment plan addressing existing inadequate crowns <u>Substandard Endodontic Care</u> <ul style="list-style-type: none"> Failed to perform and document adequate pulp testing, diagnoses, treatment plans, informed consent, medications used and materials placed, proper obturation, and use of rubber dam 	<u>Coursework</u> <ul style="list-style-type: none"> Prosthodontics one-on-one training Endodontics hands on training Treatment Planning/Recordkeeping <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and how it will be incorporated into the practice
Dentist 03/07/2012	<u>Allied Dental Staff Misuse</u> <ul style="list-style-type: none"> Licensee employed, assisted, or permitted an unlicensed dental hygienist to practice dental hygiene after DH license was terminated 	<u>Community Service</u> <ul style="list-style-type: none"> Complete 20 hours of unpaid community service <u>Jurisprudence Examination</u>
Dental Hygienist 03/08/2012	<u>Practice with Expired License x 14 Weeks</u> <ul style="list-style-type: none"> Following Failure to Renew 	<ul style="list-style-type: none"> Written Report <u>Community Service</u> <ul style="list-style-type: none"> Complete 20 hours of unpaid community service <u>Jurisprudence Examination</u>
Dentist 03/22/2012	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make or maintain adequate patient records 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Patient Records Review – Treatment and Recordkeeping</u> <ul style="list-style-type: none"> Submit patient records for review by the Committee
Dental Assistant 04/12/2012	<u>Failure of Audit of Professional Development</u> <ul style="list-style-type: none"> Failed professional development audits conducted for three consecutive cycle periods 	<u>Written Report</u> <ul style="list-style-type: none"> Report focusing on importance of maintaining a complete and timely professional development portfolio <u>Professional Development Portfolio Audit</u> <ul style="list-style-type: none"> Audit repeat for subsequent cycle <u>Jurisprudence Examination</u>
Dentist 04/20/2012	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make and maintain adequate patient records 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Reports to the Board</u> <ul style="list-style-type: none"> Periodontal care, esp. regarding protocol and importance of providing comprehensive periodontal assessments <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice <u>Jurisprudence Examination</u>
Dental Hygienist 04/20/2012	<u>Professional Misconduct</u> <ul style="list-style-type: none"> Breeched professional boundaries in obtaining patient contact information and utilizing that information to request a loan from a patient 	<u>Coursework</u> <ul style="list-style-type: none"> Ethics and Law in Dental Hygiene Professional Boundaries one-on-one training <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and how it will be incorporated into the practice HIPAA Report <u>Community Service</u> <ul style="list-style-type: none"> Complete 25 hours of unpaid community service <u>Jurisprudence Examination</u>

Dentist 06/26/2012	<u>Failure of Audit of Professional Development</u> <ul style="list-style-type: none"> Submitted professional development portfolio after the specified deadline date in three consecutive cycle periods. Considered failed audits pursuant to Rule 3100.5300. 	<u>Written Report - Professional Development Portfolio to the Board</u> <ul style="list-style-type: none"> Written report focusing on protocol for timely submission of professional development portfolio <u>Community Service</u> <ul style="list-style-type: none"> Complete 30 hours of unpaid community service
Dentist 07/12/2012	<u>Substandard Restorative Care</u> <ul style="list-style-type: none"> Failed to provide adequate restorative treatment when placing composite restorations 	<u>Coursework</u> <ul style="list-style-type: none"> Multi-day course in composite restorations, treatment planning, maintaining contacts, contours, occlusion and finishing techniques <u>Written Report of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice
Dentist 07/16/2012	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make and maintain adequate patient records 	<u>Coursework</u> <ul style="list-style-type: none"> Recordkeeping Course <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice
Dentist (x 2) 08/10/2012	<u>Allied Dental Staff Misuse</u> <ul style="list-style-type: none"> An unlicensed dental assistant employed in the office performed expanded duties beyond those allowed 	<u>Posting Credentials/Renewal Certificates Report</u> <ul style="list-style-type: none"> Submit report which on office protocol for obtaining and displaying appropriate credentials from each and every licensed employee or associate upon initial employment Outline the protocol for obtaining and displaying <i>renewal</i> certificates from each and every licensed employee or associate Provide a revised copy of the office document entitled "New Employee Checklist" that indicates the proper credentials for dental assistants as "LDA" and "CDA" <u>Community Service</u> <ul style="list-style-type: none"> Complete 20 hours of unpaid community service <u>Jurisprudence Examination</u>
Dentist 08/16/2012	<u>Substandard Care</u> <ul style="list-style-type: none"> Insufficient clinical examinations records obtained to support diagnoses, periodontal, prosthodontic, and oral surgery care (lacking medical history periodontal assessment, rationale for extractions/sinus lifts/implants) Exposed patient to unnecessary radiation by taking excessive CT scans, with no diagnostic interpretations Overprescribed medications Failed to diagnose significant post-surgical symptoms following care provided by a specialist in licensee's office or provide appropriate treatment <u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to document patient's existing oral health status, diagnoses, treatment plans, make appropriate corrections in record, or sign treatment notes <u>Unprofessional Conduct</u> <ul style="list-style-type: none"> Failed to comply with sedation certification requirements Misrepresented practice in advertisements Violated fee-splitting regulations by providing patient account credits for referrals to the practice 	<u>Coursework</u> <ul style="list-style-type: none"> Treatment Planning/Recordkeeping <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from course and how it will be incorporated into the practice Dental Radiology Report <u>Jurisprudence Examination</u>
Dentist 08/04/2012	<u>Substandard Recordkeeping</u> <ul style="list-style-type: none"> Failed to make and maintain adequate dental records <u>Improper Billing</u> <ul style="list-style-type: none"> Failed to properly bill a patient/third party payor consistent with treatment estimate 	<u>Coursework</u> <ul style="list-style-type: none"> Dental Coding and Billing Treatment Planning/Recordkeeping <u>Written Reports of Coursework to the Board</u> <ul style="list-style-type: none"> Specific information addressing the knowledge gained from courses and how it will be incorporated into the practice <u>Inspection</u> <ul style="list-style-type: none"> Patient records inspection following completion of coursework
Dentist 10/10/2012	<u>Allied Dental Staff Misuse</u> <p>Allowed unlicensed dental hygienist whose license had been terminated to practice dental hygiene</p>	<u>Credential Verification</u> <ul style="list-style-type: none"> Provide photographic evidence of display of current credentials <u>Community Service</u> <ul style="list-style-type: none"> Complete 25 hours of unpaid community service <u>Jurisprudence Examination</u>

UPCOMING BOARD AND COMMITTEE MEETINGS

NOVEMBER 2012

Policy Committee Meeting (open)	November 7, 2012
Sedation Committee Meeting (open)	November 7, 2012
Complaint Committee A (closed)	November 9, 2012
VETERAN'S DAY: OFFICE CLOSED	November 12, 2012
Licensure and Credentials Committee Meeting (open/closed)	November 16, 2012
THANKSGIVING HOLIDAY DAY: OFFICE CLOSED	November 22-23, 2012
Executive Board Meeting (closed)	November 27, 2012
Complaint Committee B (closed)	November 29, 2012

DECEMBER 2012

Advertising Task Force (open)	December 5, 2012
Policy Committee Meeting (open)	December 5, 2012
Sedation Committee Meeting (open)	December 5, 2012
Complaint Committee A Meeting (closed)	December 7, 2012
Allied Education Committee Meeting (open)	December 12, 2012
PUBLIC BOARD MEETING (open)/EXECUTIVE BOARD (closed)	December 14, 2012
Complaint Committee B Meeting (closed)	December 20, 2012
CHRISTMAS HOLIDAY: OFFICE CLOSED	December 25, 2012

Board Members

Neal U Benjamin, DDS, President (2013) Lino Lakes
 Nancy Kearn, DH, Vice President (2013)..... Wyoming
 Teri Youngdahl, LDA, Secretary (2014) Elk River
 Joan A Sheppard, DDS, Past President (2015) Bloomington
 Candace Mensing, DDS (2014) Rochester
 John M "Jake" Manahan, Public Member (2015) ... Bloomington
 Paul O Walker, DDS (2015) Shoreview
 David Gesko, DDS (2016) Shorewood
 Allen Rasmussen, Public Member (2016) International Falls

Board Staff

612-617-2250 or 888-240-4762

Marshall Shragg Executive Director
 Joyce Nelson Director of Licensure
 Mary Dee Liesch Director of Complaints & Compliance
 Sheryl Herrick Office Manager
 Deborah Endly Compliance Officer
 Judith Bonnell Complaint Analyst
 Kathy Johnson Legal Analyst
 Amy Johnson Licensing & Prof'l Development Analyst
 Linda Johnson Administrative Assistant
 Cynthia Thompson Administrative Assistant



2829 University Ave SE, Ste 450
 Minneapolis, MN 55414
 612-617-2250
www.dentalboard.state.mn.us